

Media Watch

Challenging *ER*'s psychokiller

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ER, the US television drama of high-adrenaline medical heroics, has blazed its way into a 6th season. It has undoubtedly captured the public imagination, with its strong characters, uneasy tensions, and frenetic trauma calls. Highly positive images of health care professionals are presented to a huge number of viewers. This year, in the week starting January 18, it was seen in 21 million of a possible 99.4 million US households.

Two infamous episodes involving the double stabbing of medical student Lucy and resident Carter caused public excitement, sadness, and even grief. In the first, we saw Lucy working up the case of a young married man, Paul, who had presented with headaches. Carter offers minimal supervision. When the man becomes disoriented, Lucy carries out a lumbar puncture while Carter holds him down. All examination and test results are normal, and when Paul's college friends describe a recent increase in bizarre and suspicious behavior, a psychiatry consultation is requested. The psychiatrist is busy, so Paul remains untreated in a secluded side room. The episode ends with Paul's unprovoked and vicious assault on the medics.

Carter falls to the floor to see Lucy bleeding to near death under the patient's gurney.

In the second episode, we saw the brutal resuscitation and harrowing surgery of both victims. In the midst of this clinical chaos, Paul returns. He had escaped the hospital but was hit by a car. Although Paul is clearly psychotic and has life-threatening injuries, consultant Dr Weaver cannot bring herself to treat him and hands his care over to a colleague. Lucy awakes postoperatively, and true to form, she diagnoses a pulmonary embolus in herself and then dies. Carter survives.

This was undoubtedly a dramatic and powerful storyline. But after seeing the episodes, we became concerned about *ER*'s portrayal of mentally ill people. Did it only ever show them as violent and dangerous? We went back and watched 22 consecutive episodes to see how psychiatric patients were represented.

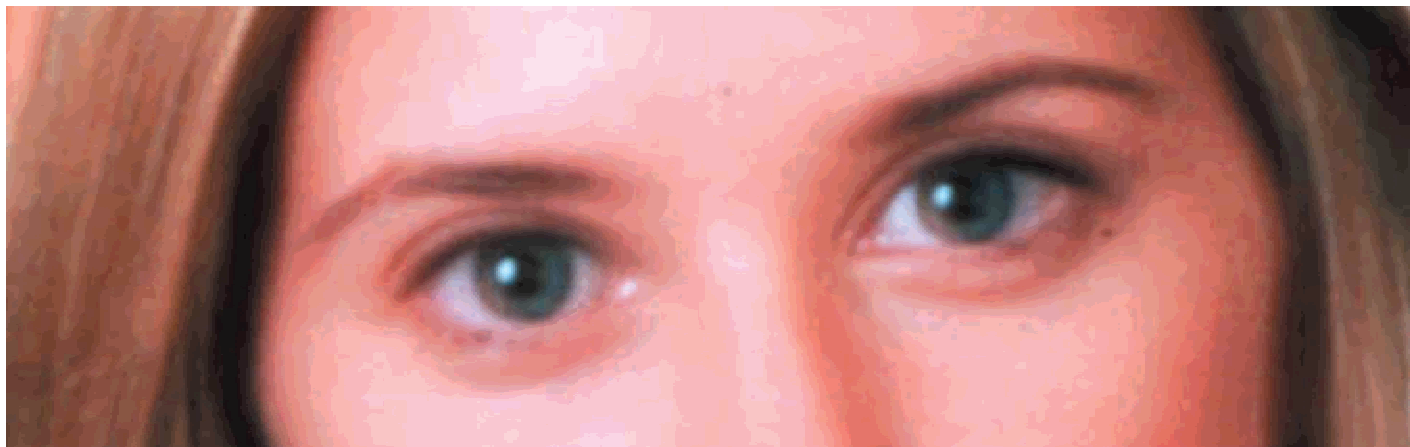
MENTAL ILLNESS AS PORTRAYED ON *ER*

In these episodes, 28 patients are portrayed with psychiatric problems, most often substance misuse. Six are psychotic. One man

smashes his car with a baseball bat because "demons" are telling him to harm his wife. A woman who thinks she is a bird is brought into the emergency department in a huge birdcage. The administration of haloperidol is advised before bolt cutters are obtained to release her. A woman masquerading as a physician stalks a male staff member as part of a delusion of erotomania.

Five patients deliberately harm themselves, mostly through destructive acts such as cutting. One man encourages another to drill a hole in his forehead, and a depressed woman threatens to harm others. A man with mental health problems shoots his wife and children, and a patient with similar problems kills a police officer.

Four children are shown with attention hyperactivity disorder and 4 adults with post-traumatic stress disorder, 1 of whom becomes aggressive when recollecting the traumatic experiences. One child kills another, and there is a suggestion that he has psychological problems because a psychiatry consultation is requested. The 1 suicide is an extreme situation in which a man first rapes a comatose patient and then hangs himself.



THE MESSAGE TO VIEWERS

These examples suggest to the audience that mentally ill people are nearly always destructive, either to themselves or others. The dominant theme is of threat. Although emergency psychiatrists do see violent patients, *ER* clearly overrepresents this danger. More important, it fails to offer an empathic view of the distress that mental illness causes to sufferers. We fear that many viewers will share Dr Weaver's revulsion at the "psycho" who killed Lucy and maimed Carter. Even depressed and suicidal patients are shown harming others.

The series, in making such a strong association between psychiatric illness and violence, is following established trends in television news, drama, and the tabloid press. It is adding to the process of stigmatization by the media.

The US National Alliance for the Mentally Ill (NAMI), a self-help and family advocacy organization, campaigns against this me-

dia stigmatization. Stella March, of the NAMI "Stigmabusters" campaign, said of the *ER* stabbing episode, "We found this episode to be deeply troubling for the association it

degree of realism when it deals with medical and surgical emergencies. Would that it would offer the same degree of accuracy in its portrayal of psychiatry. Where are the cases in

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made between mental illness and violence, as did many, many NAMI members who contacted us after the show."

ER features strong stories with harrowing images. These fail to offer a sympathetic view of people with mental health problems. It is too late to object formally to the producers, and we are not suggesting censorship. The irony here is that this series achieves a high

which patients are helpfully supported through the terror and distress of their acute illness?

The proportion of homicides committed by mentally ill people in Britain has fallen annually since 1957. The challenge now is to propagate some positive media stories, creating more accurate images to capture the public imagination.